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Attorney Docket No. 1389.01

First Inventor. Craft

UTILITY	Allomey Docker No.							
PATENT APPLICATION	First Inventor	Craft						
TRANSMITTAL	Title	Ant-Proof Pe						
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.							
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450	6					
1.								
6. X Application Data Sheet. See 37 CFR 1.76 or its equivalent. Other:								
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
19. CORRESPO	NDENCE ADDRESS							
Customer Number: OR Correspondence address below								
Name Melvin K. Silverman								
Address 500 West Cypress Creek Road								
City Suite 500	State F1.	Zip Code	33309					
Country Fort Lauderdale	Telephone	Fax						
Name (Print/Type)	Registration No. (Attorne	ey/Agent) 26 2	3.4					

This collection of information is fequired by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DN DOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mall Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date

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PTO/SB/17 (01-03)
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for TV 2002	ſ	Filing	Date				
for FY 2003		First Named Inventor		Invent	tor David Blain Craft	David Blain Craft	
Effective 01/01/2003. Patent fees are subject to annual revision. Examiner Name							
Applicant claims small entity status. See 37 CFR 1.27		Art Unit					
TOTAL AMOUNT OF PAYMENT (\$) 375.00	1	Attorney Docket No. 1389.01					
		Attori	Cy Door	==			
METHOD OF PAYMENT (check all that apply)					CALCULATION (continued)		
Check Credit card Money Other None 3. ADDITIONAL FEES							
Deposit Account:	Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee Pescription						
Deposit Account 502557	Code	: (\$)	Code ((\$)	Fee Description	Fee Paid	
Number	1051	130	2051		Surcharge - late filing fee or oath Surcharge - late provisional filing fee or		
Account Name Melvin K. Silverman	1052	50	2052		cover sheet	 	
The Commissioner is authorized to: (check all that apply)	1053		1053	_	Non-English specification For filing a request for <i>ex parte</i> reexaminati	<u>_</u>	
Charge fee(s) indicated below Credit any overpayments		2,520	1812 2,	•	· · · · · · · · · · · · · · · · · · ·	"'[][
Charge any additional fee(s) during the pendency of this application	1804	920*	1804		Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805 1		Requesting publication of SIR after Examiner action		
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	į į,	
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month		
Large Entity Small Entity	1253	930	2253	465	Extension for reply within third month		
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,450	2254	725	Extension for reply within fourth month	}	
1001 750 2001 375 Utility filing fee \$375.00	1255	1,970	2255	985	Extension for reply within fifth month	 	
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal		
1003 520 2003 260 Plant filing fee	1402	320	2402		Filing a brief in support of an appeal		
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451		ľ		Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) \$375.00	1452		2452		Petition to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2453		Petition to revive - unintentional	 	
Fee from Extra Claims below Fee Paid	1501	1,300 470	2501 2502		Utility issue fee (or reissue) Design issue fee		
Total Claims	1502		2503		Plant issue fee		
Independent Claims - 3** ≈ X = =	1460		1460		Petitions to the Commissioner		
Multiple Dependent =	1807		1807	50	Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity	1806	180	1806	180	Submission of Information Disclosure Stm		
Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1202 18 2202 9 Claims in excess of 20	1809	750	2809		Filing a submission after final rejection		
1201 84 2201 42 Independent claims in excess of 3 1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	(37 CFR 1.129(a)) For each additional invention to be	 	
1204 84 2204 42 ** Reissue independent claims	1010	150	2010	313	examined (37 CFR 1.129(b))	 	
over original patent	180 ⁻		2801		Request for Continued Examination (RCE	:)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application		
SUBTOTAL (2) (\$) 0	Other fee (specify)						
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid *SUBTOTAL (3) (\$) 0							
SUBMITTED BY (Complete (if applicable)							
Name (Print/Type) Melyin K. Silverman		Registra (Attorney	tion No. (Agent)	26,	234 Telephone 954 351-747	4	

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